

Conditions of Award

Ryan White CARE Act Title I Year 12

Charles L. Henry, Director
County of Los Angeles
Department of Health Services
Office of AIDS Programs and Policy



Conditions of Award (COAs)

Definition: requirements HRSA imposes on EMAs to ensure appropriate, on-going implementation of planning and service practices mandated by legislation

Process: HRSA details the requirements which must be met by specific deadlines; when the COAs are satisfactory, the conditions are “removed”



Conditions of Award (COAs)

Significance: 26 points, more than a quarter of the supplementary funding award; affects the formula funding award; failure to remove conditions may lead to suspension of funding

Impact: total award of \$37,962,755; supplementary award of \$16,260,128; 26 points (*received with award on 2/15/02*); roughly \$162,600 per point



COA A.2: Budget Revisions

- Budget, in Form 424A, consistent with application and in accordance with final award
- Narrative justifications for Administration, Quality Management, Planning Council Support, Program Support
- Actual service category allocations



COA A.2: Budget Revisions

Purpose: Implementation in accordance with final grant award

CHHS Involvement: Approval of service category allocations and Planning Council Support budget approved 7/01 by CHHS

Due: 4/16/2002

Last Year's Point Value: 3 points



COA A.2a: Quality Management

- EMA's description of the FY 2002 Quality Management Plan
 - Any changes of the plan detailed in application due to the final award



COA A.2a: Quality Management

Purpose: Implementation of legislative quality management mandate

CHHS Involvement: Administrative agency responsibility in coordination with the planning council

Due: 4/16/2002

New Condition: Point value unknown



COA B: Membership Requirements

- Letter from CHHS assuring the body's compliance with the 33% consumer membership mandate
- Letter must also assure that the CHHS and the consumer membership accurately reflect the demographics of the epidemic in the EMA
- Revised Tables 2, 3, 4 and 4a



COA B: Membership Requirements

Purpose: Ensure compliance with new consumer membership mandates and demographic reflectiveness

CHHS Involvement: Letter from CHHS and approval of tables

Due: 4/16/2002

Last Year's Point Value: 2 points



COA B.1: Financial Status Report

- EMA Title I expenditures for the FY 2001 period, 3/1/00 - 2/28/01
- SF(Standard Form) 269 in accordance with the FY 2001 final award
- Incrementally declining points if less than 95% of the funding used during the fiscal year



COA B.1: Financial Status Report

Purpose: Ensure proper expenditure of Title I funding

CHHS Involvement: CHHS set and approved the allocations; Fiscal Committee oversees monthly expenditures

Due: No later than 9/30/2002

Last Year's Point Value: 7 points



COA B.2: CARE Act Data Report

Provider and client-level data for the FY 2001 period, 3/1/00 - 2/28/01

Purpose: Track epidemiological and demographic disease trends

CHHS Involvement: Available for use in Year 13 priorities-/allocations-setting process

Due: 3/15/2002

No Points Attached



COA B.3: Annual (Final) Progress Report

- Report on the programmatic efforts during for the FY 2001 period, 3/1/01 - 2/28/02, including:
 - I. Allocation of Title I Funds by Service Category:
Actual service category expenditures, Table 9
 - Allocations tables required by Office of Management and Budget (OMB)



COA B.3: Annual (Final) Progress Report

- II. Progress in Program Implementation:**
Description of programs and services during FY 2001
- Narrative: Detail of major challenges, accomplishments, significant changes in goals/objectives
 - Table 10: Shows actual, not proposed, numbers of clients and service units
- III. Minority AIDS Initiative (MAI):** See COA F



COA B.3: Annual (Final) Progress Report

- IV. Challenges in Program and Fiscal Monitoring: Discussion of problem areas in monitoring, and corrective actions taken
- V. Quality Management Programs: Description of the funding and source of the QM program
 - Coordination with the PC on QM activities
 - Activities started in FY 2001 grant cycle
- VI. Grievance Procedure Process: Updates
 - Grievances, outcomes, necessary actions



COA B.3: Annual (Final) Progress Report

VII. Planning Council Bylaws: Changes made to PC bylaws to comply with the Reauthorized CARE Act

- Must submit current version of the Bylaws

VIII. Certification of Aggregate Administrative Costs: Certification that providers' administrative expenses do not, in the aggregate, exceed 10% of the total award



COA B.3: Annual (Final) Progress Report

Purpose: Assess the EMA's program implementation in accordance with HRSA directives

CHHS Involvement: Grievance procedures, quality management, evaluation of service effectiveness, bylaws, priorities and allocations

Due: No later than 9/30/2002

Last Year's Point Value: 2 points



COA B.4: Audit

Audit of the grantee mechanism compliant with OMB Circular A-133
Annual County of Los Angeles audit of FY 2001 (July 2000 - June 2001)

Purpose: Grantee compliance to OMB A-133

CHHS Involvement: None

Due: 30 days after audit approved

No Points Attached



COA C.1-3: FY 2002 Priorities/Allocations

- COA C.1: Service category allocations set consistent with the Commission's FY 2002 priorities/allocations and the award
- COA C.2: CHHS letter endorsing the consistency of allocations with those set by the Commission in July 2001
- COA C.3: Revised FY 2002 Table 10: Projected client numbers and service goals



COA C.1-3: FY 2002 Priorities/Allocations

Purpose: Ensure services are procured in accordance with PC's priorities and allocations

CHHS Involvement: Sets priorities and determines allocations; assures their implementation consistent with the priorities/allocations

Due: 6/14/2002

Last Year's Point Value: 3 points



COA D.1-4: Provider Budget Packages

- COA D.1: Consolidated List of Contracts: summary of each provider, service types and organizational classifications
- COA D.2: Contract Review Certification (CRC): cover sheet certifying contracted funds to each provider/contractor



COA D.1-4: Provider Budget Packages

- COA D.3: Budgets and narrative justifications: Full budgets and accompanying narratives for every contract and schedule
 - Separate budget formats for cost reimbursement contracts vs. fee-for-service contracts
 - Requires considerable work from all OAPP program managers and financial services staff
 - Requires considerable financial reporting by providers



COA D.1-4: Provider Budget Packages

- COA D.4: Sources of funding: Summary of other sources of funding used by providers
 - To ensure CARE act dollars are being used as “last resort”
 - To ensure that providers are accessing other, available sources of funding
 - Providers are required to complete tables detailing all other sources of funding, or funding may be suspended until they do



COA D.1-4: Provider Budget Packages

Purpose: Ensure that all funds are obligated; ensure that CARE Act dollars are used as a “last resort”

CHHS Involvement: Set allocations, assess the EMA’s ability to use those funds effectively

Due: 6/14/2002

Last Year’s Point Value: 4 points



COA E: Referral Relationships

- Summary of referral relationships with organizations that provide key points of access to CARE Act services
 - Include contract language/other methods to establish and document ongoing relationships with local points of entry



COA E: Referral Relationships

Purpose: Ensure integration of local points of entry into care system; establishing a seamless system of care; meeting HRSA's goal of 100% access/0% disparity

CHHS Involvement: Points of entry relationships should be incorporated into PC priorities

Due: 7/31/2002

New Condition: Point value unknown



COA F.1-3: Minority AIDS Initiative (MAI)

- COA F.1: Plan for use of MAI funds in FY 2002
- COA F.2: Interim FY 2002 report on the use of funding
- COA F.3: Final report on MAI funding use in FY 2002



COA F.1-3: Minority AIDS Initiative (MAI)

Purpose: Ensure access by “hard-to-reach” populations; Goal of 100% access/0% disparity

CHHS Involvement: MAI funding should be prioritized by planning council

Due:

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|----------|-----------|
| COA F.1: | 6/14/2002 |
| COA F.2: | 10/1/2002 |
| COA F.3: | 5/30/2003 |

Last Year's Point Value: 3 points



COA G: Women, Infants, Children, Youth (WICY)

- Guarantee that WICY expenditures match or exceed the ratio of each WICY population with AIDS in the general population living with AIDS in the EMA
 - Providers are required to show the amounts and percentages of grant funds used to provide services to WICY
 - Can prove that other funding provides adequate services or can request a waiver



COA G: Women, Infants, Children, Youth (WICY)

Purpose: Per legislation, report on adequacy of services to WICY populations

CHHS Involvement: CHHS should consider services to WICY during priority- and allocation-setting process

Due: 7/1/2003

Point Value: 2 points last year, none in 2002



COA H: Local Pharmacy Assistance

- If funds used to purchase or reimburse for outpatient medical pharmaceuticals, description of the grantee's drug acquisition policies
 - Los Angeles County provides limited funding for drugs not paid for by ADAP
 - Must provide description of cost savings and strategies
 - Include the formulary with the description



COA H: Local Pharmacy Assistance

Purpose: Ensuring seamless system of care

CHHS Involvement: Planning council can prioritize the service or make it a directive

Due: 7/31/2002

New Condition: Point value unknown



COA I: Special Conditions

None assigned to Los Angeles County

Purpose: Correct deficiencies noted by HRSA in program implementation (for example, if LA County does not meet consumer membership requirement this year, it will be a special condition next year)

CHHS Involvement: Varies

Due: Varies, may represent multiple deadline

Point Value: Point deduction if conditions not removed, possible suspension of funding

